



The Commonwealth of Massachusetts

Alcoholic Beverages Control Commission

239 Causeway Street

Boston, MA 02114

OFFER IN COMPROMISE IN LIEU OF SUSPENSION

1. _____
Name of Licensee (including dba, if any)

2. _____
Street Address of Premises City/Town

3. _____
Mailing Address (if different from line 2)

4. _____
Type of License

5. The above licensee offers to the A.B.C.C. a fine in lieu of the Commission's recent suspension of this license. The licensee certifies that this offer is computed according to the formula set forth in MGL Chapter 138, Section 23. If this offer is accepted, the licensee waives all rights to appeal and waives judicial review of the Commission's decision.

5a. Violation date _____

5b. Number of suspension days _____

6. The amounts entered on lines 7 and 8 may be from either the twelve months immediately preceding the date of the violation or, for licensees that have been in business for more than one year, from the licensee's most recent full fiscal (income tax) year.

State the period covered by the figures on lines 7 and 8:

7. Gross annual receipts from sale of alcoholic beverages _____

8. Invoiced annual cost of goods sold
(alcoholic beverages only) _____

9. Gross Annual Alcoholic Beverage Profit
(Line 7 minus line 8) _____

10. Annual days of operation (7 day licensees
enter 365, 6 Day licensees enter 313, special
and others enter actual days open during the

year preceding the violation date) _____

11. Per diem gross alcoholic beverage profit
(divide line 9 by line 10) _____
(continue on other side)

Enter amount from line 11 _____

12. Enter 50% of amount shown on line 11 _____

13. Per diem fine (enter greater of line 12 or
\$40.00) _____

14. Days of suspension (from line 5b) _____

15. OFFER IN COMPROMISE
(line 13 multiplied by line 14) _____

Signed under the penalties of perjury,

Licensee (If licensee is a Corporation, Manager of Record) Date

ACCOUNTANT'S CERTIFICATION

I certify that I have examined the books and records of the above licensee and that the figures contained in the petition are correct.

Licensed Public Accountant Mass. Lic. No. Date

Licensed Public Accountant (**Print Name Clearly**)

Accountant Address

NOTICE: THIS OFFER MUST BE DELIVERED TO THE ABCC WITHIN TWENTY DAYS OF RECEIPT OF THE COMMISSION'S DECISION AND MUST BE ACCOMPANIED BY A CERTIFIED OR BANK CHECK FOR THE FULL AMOUNT OF THE OFFER PAYABLE TO THE ALCOHOLIC BEVERAGES CONTROL COMMISSION. THE OFFER MUST BE SIGNED BY A MASSACHUSETTS LICENSED ACCOUNTANT.

REV. 5/02